PRETREATMENT PROGRAM STATUS UPDATE

INSTRUCTIONS: This attachment is intended to serve as an update of program status. Either the auditor or CA should updated this form before each audit on the basis of information obtained from the most recent PCI and/or audit and the last pretreatment program performance report.						
A. CA INFORMATION	am penomi	апсе тероп.				
1. CA name						
2. a. Pretreatment contact	b. Mailing address					
c. Title d. Telephone number						
3. Date of last CA report to Approval Authority 4. Is the CA operating under any pretreatment-related consent decree.						
4. Is the CA operating under any pretreatment-related consent decree, Administrative Order, compliance schedule, or other enforcement action?			res	No		
5. Effluent and sludge quality	ledule, or c	other emorcement actions				
a. List the NPDES effluent and sludge	e limits viola	ated and the suspected cause(s)				
Parameters Violated		Cause(s)				
b. Has the treatment plant sludge violated these tests?			Yes	No		
EP toxicity TOLD						
• TCLP			Yes	No		
6. Does the treatment plant discharge to a 303/d) impaired waterhody?			162	NO		
6. Does the treatment plant discharge to a 303(d) impaired waterbody? If yes, list the pollutants of concern.						
in you, not the pondiante of concern.						
			Yes	No		
7. Does the treatment plant discharge to						
been developed or is being developed?						
If yes, include the information on the TMDL (i.e., pollutants of concern, limits, effective date).						

PRETREATMENT PROGRAM STATUS UPDATE

B. PRETREATMENT PROGRAM STATUS						
Indicate components that were identified as deficient.						
		Last PCI	Last Audit	Drogram	n Report	
		Date:	Date:	Date:	report	
a. Program modification		Date.	Date.	Date.		
b. Legal authority						
c. Local limits						
d. IU characterization						
e. Control mechanism	Diameta wala					
f. Application of Pretreatment S	Sianuarus					
g. Compliance monitoring						
h. Enforcement program						
I. Data management						
j. Program resources						
k. Other (specify)						
O le the OA serve with the DNO feet		4:0	Data Carra	- V	NI-	
2. Is the CA presently in RNC for any of these violations? a. Failure to enforce against pass through and/or interference		Data Sourc	e Yes	No		
a. Failure to enforce against pass [RNC - I][SNC]	s through and/or into	епегепсе				
b. Failure to submit required repo	orts within 30 days [RNC - I] [SNC]				
c. Failure to meet compliance schedule milestones within 90 days [RNC-I][SNC]						
d. Failure to issue/reissue control mechanisms to 90% of SIUs within 6 months [RNC - II]						
e. Failure to inspect or sample 80% of SIUs within the past 12 months [RNC - II]						
f. Failure to enforce standards a	nd reporting require	ments [RNC - II]				
g. Other (specify) [RNC - II]						
3. List SIUs in SNC identified in t	he last pretreatme	nt program perfo	rmance report,	PCI, or au	dit,	
(whichever is most recent)	-					
Name of SIU in SNC	Compliance Status		(Source		
				141 41 6 11		
4. Indicate the number and percent of SIUs that were identified as being in SNC* with the following requirements from the CA's last pretreatment program report. If the CA's report does not provide						
this information, obtain the information for the most recent four full quarters during the audit.						
SNC Evaluation Period						
% Applicable Pretreatment Standards and reporting requirements *SNC defined by:					ned by:	
	% Self-monitoring requirements			POTW		
% Pretreatment compliance schedules			EPA			

PRETREATMENT PROGRAM STATUS UPDATE

B. PRETREATMENT PROGRAM STATUS (continued)				
Describe any problems the CA has experienced in program. Describe any problems the CA has experienced in program. Describe any problems the CA has experienced in program. Describe any problems the CA has experienced in program. Describe any problems the CA has experienced in program. Describe any problems the CA has experienced in program. Describe any problems the CA has experienced in program. Describe any problems the CA has experienced in program. Describe any problems the CA has experienced in program. Describe any problems the CA has experienced in program. Describe any problems the CA has experienced in program. Describe any problems the CA has experienced in program. Describe any problems the CA has experienced in program. Describe any problems the CA has experienced in program. Describe any problems the CA has experienced in program. Describe any problems the CA has experienced in program. Describe any problems the CA has experienced in program and problems the CA has experienced in problems the CA has	,			
ATTACHMENT A COMPLETED BY:	DATE:			
TITLE:	TELEPHONE:			